STATE OF WISCONSIN, CIRCUIT COURT,	COUNTY	For Official Use
IN THE INTEREST OF	Certificate to Delegation of Powers under §48.979	
Name	of an Indian Child	
Date of Birth	Case No	
A Consent to Delegation of Power of an Indian Child was filed by [Parent Name]on [Date]		
I certify that I am the judge of the circuit court of County, State of Wisconsin, a court of record. The above named parent appeared before me on this date. The terms and consequences of the delegation of powers were fully explained in detail and were fully understood by the parent and I found this consent to be informed and voluntary before I accepted it.		
	Circuit Court Judge	
	Name Printed or Typed	
	Date	_